SENDER: COMPLETE THIS SECTION COMPLETE THE SECTION ON DELIVERY ■ Complete items 1, 2, and 3. Also complete A. Received by (Please Print Clearly) B. Date of Delivery item 4 if Restricted Delivery is desired. Print your name and address on the reverse C. Signature so that we can return the card to you. Attach this card to the back of the mailpiece, ☐ Agent X MK or on the front if space permits. ☐ Addressee D. Is delivery address different from item 1? ☐ Yes 1 Article Addressed to 11-18-07 If YES, enter delivery address below • 01-348 Barry D Wood ⊟Wood, Maines & Brown 1827 Jefferson Place, NW Service Type Washington, DC 20036 ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail □ ¢.o.d. 4. Restricted Delivery? (Extra Fee) ☐ Yes 2 Article Number (Copy from service label) oll i illi 1 1 11 11 1166 *003*3 PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952 DOCKET NO. 01-348 ORDER DATED CERTIFIED MAIL RECEIPT **RETURN** NON & 2002 NAME: Barry D. Wood Wood, Maines & Brown 1827 Jefferson Place, N.W. Washington, DC 20036

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3129	Article Sent To:			
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	Certified Fee	250		Postmark
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7000	Street, Apt No., or PO. BOX No. /827 JEFFERSON PIME, N.W. City State, ZIF-4 (1) 2544 STW IX. 20036			
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